ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS):			TELEPHONE NO.:	FOR COURT USE ONLY
ATTORNEY FOR (NAME): SUPERIOR COURT OF CALIF	ORNIA, COUNTY OF			-
STREET ADDRESS: MAILING ADDRESS:				
CITY AND ZIP CODE: BRANCH NAME:				
TEMPORARY GUARDIANS	HIP CONSERVATOR	RSHIP OF	(NAME):	
☐ Minor ☐ Conservatee				•
LETTERS OF TEMPORARY	☐ GUARDIANSHIP☐ Person	COI	NSERVATORSHIP ate	CASE NUMBER:
STATE OF CALIFORNIA, COUNTY	OF		4. Af	FIRMATION
(Name): is appointed temporary	guardian		I solemnly affirm that I v	vill perform the duties of tem-
conservator of the person estate of (name):		porary guardian conservator according to law.		
 Other powers have been granted or restrictions imposed on the temporary guardian conservator as 			Executed on (date):	
	specified in attachn	nent 2.	at (place):	
			(Signa	ature of appointee)
			5. CE	RTIFICATION
 3. These Letters shall expire thirty days after the appointment of the temporary guardian conservator (specify expiration date): or upon earlier notice of appointment of a general guardian or conservator. other date (specify): 			I certify that this document and any attachments is a correct copy of the original on file in my office, and that the Letters issued to the person appointed above have not been revoked, annulled, or set aside and are still in full force and effect.	
Dated:			Dated:	
Clerk, by, Deputy			Clerk, by, Deputy	
Number of pages attach	ed:		SEAL	